

1 Pw/1639

 TRANSMITTAL  
FORM

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 Total Number of Pages in This Submission **2**

 Application Number **10/081,526**

 Filing Date **02/21/2002**

 First Named Inventor **Jack Wilkinson et al.**

 Art Unit **1639**

 Examiner Name **Wessendorf, Theresa D.**

 Attorney Docket Number **0174.210US/16185US02**

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney And Correspondence Address Indication Form	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Return-Receipt Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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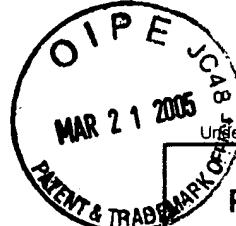
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	McAndrews Held & Malloy, Ltd.		
Signature			
Printed Name	Donald J. Pochopien, Reg. No. 32,167		
Date	March 16, 2005		

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			March 16, 2005



POWER OF ATTORNEY  
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CORRESPONDENCE ADDRESS  
INDICATION FORM

Application Number	10/081,526
Filing Date	02/21/2002
First Named Inventor	Jack Wilkinson et al.
Title	Methods For Improving Or Altering Promoter/Enhancer Properties
Art Unit	1633 1639
Examiner Name	Not yet assigned
Attorney Docket Number	0174.210US/16185US02

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

23,446

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Date

3/11/2005

Name

Michael Rabson

Telephone

(650) 298-5300

Title and Company

Senior Vice-President, Maxygen, Inc.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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